

Senate File 2356

S-5152

1 Amend Senate File 2356 as follows:

2 1. By striking page 11, line 15, through page 21,
3 line 26, and inserting:

4 <Sec. _____. NEW SECTION. 505.32 Iowa insurance
5 information exchange.

6 1. *Purposes.* The purposes of this section include
7 but are not limited to providing an information
8 clearinghouse where all Iowans can obtain information
9 about health care coverage that is available in the
10 state including comparisons of benefits, premiums, and
11 out-of-pocket costs and where the uninsured can receive
12 assistance regarding health care coverage.

13 2. *Definitions.* As used in this section, unless
14 the context otherwise requires:

15 a. "Board" means the advisory board of the Iowa
16 insurance information exchange.

17 b. "Carrier" means an insurer providing accident
18 and sickness insurance under chapter 509, 514, or
19 514A and includes a health maintenance organization
20 established under chapter 514B if payments received
21 by the health maintenance organization are considered
22 premiums pursuant to section 514B.31 and are taxed
23 under chapter 432. "Carrier" also includes a
24 corporation which becomes a mutual insurer pursuant
25 to section 514.23 and any other person as defined in
26 section 4.1, who is or may become liable for the tax
27 imposed by chapter 432.

28 c. "Commissioner" means the commissioner of
29 insurance.

30 d. "Creditable coverage" means the same as defined
31 in section 513B.2.

32 e. "Exchange" means the Iowa insurance information
33 exchange.

34 f. "Group health plan" means the same as defined in
35 section 513B.2.

36 g. "Health care services" means services, the
37 coverage of which is authorized under chapter 509, 514,
38 514A, or 514B and includes services for the purposes
39 of preventing, alleviating, curing, or healing human
40 illness, injury, or physical disability.

41 h. "Health insurance" means accident and sickness
42 insurance authorized by chapter 509, 514, or 514A.

43 i. (1) "Health insurance coverage" means health
44 insurance coverage offered to individuals.

45 (2) "Health insurance coverage" does not include any
46 of the following:

47 (a) Coverage for accident-only or disability income
48 insurance.

49 (b) Coverage issued as a supplement to liability
50 insurance.

1 (c) Liability insurance, including general
2 liability insurance and automobile liability insurance.
3 (d) Workers' compensation or similar insurance.
4 (e) Automobile medical-payment insurance.
5 (f) Credit-only insurance.
6 (g) Coverage for on-site medical clinic care.
7 (h) Other similar insurance coverage, specified in
8 federal regulations, under which benefits for medical
9 care are secondary or incidental to other insurance
10 coverage or benefits.

11 (3) "Health insurance coverage" does not include
12 benefits provided under a separate policy as follows:
13 (a) Limited-scope dental or vision benefits.
14 (b) Benefits for long-term care, nursing home care,
15 home health care, or community-based care.
16 (c) Any other similar limited benefits as provided
17 by rule of the commissioner.

18 (4) "Health insurance coverage" does not include
19 benefits offered as independent noncoordinated benefits
20 as follows:
21 (a) Coverage only for a specified disease or
22 illness.
23 (b) A hospital indemnity or other fixed indemnity
24 insurance.

25 (5) "Health insurance coverage" does not include
26 Medicare supplemental health insurance as defined under
27 section 1882(g)(1) of the federal Social Security Act,
28 coverage supplemental to the coverage provided under
29 10 U.S.C. ch. 55 and similar supplemental coverage
30 provided to coverage under group health insurance
31 coverage.

32 *j.* "Medical assistance program" means the
33 federal-state assistance program established under Tit.
34 XIX of the federal Social Security Act and chapter
35 249A.

36 *k.* "Medicare" means the federal government health
37 insurance program established under Tit. XVIII of the
38 federal Social Security Act.

39 *l.* "Organized delivery system" means an organized
40 delivery system as licensed by the director of public
41 health.

42 3. *Iowa insurance information exchange established*
43 *— advisory board.*

44 *a.* An Iowa insurance information exchange is
45 established in the insurance division of the department
46 of commerce under the purview of the commissioner of
47 insurance.

48 *b.* The exchange shall exercise its powers in
49 consultation with the advisory board established under
50 this subsection.

1 c. The advisory board of the exchange shall consist
2 of the following members:
3 (1) The following persons who are voting members
4 of the board appointed by the governor and subject to
5 confirmation by the senate:
6 (a) A health care academic with a background in
7 economics, law, or public health.
8 (b) An executive of a carrier.
9 (c) A health benefits manager of a company.
10 (d) A health care analyst representing a public or
11 private employee bargaining unit.
12 (e) A health care analyst representing an organized
13 consumer group.
14 (f) A health care provider.
15 (g) An insurance agent.
16 (2) The following persons who are ex officio,
17 nonvoting members of the board:
18 (a) The commissioner of insurance, or a designee.
19 (b) The Iowa Medicaid director, or a designee.
20 (c) Four members of the general assembly,
21 one appointed by the speaker of the house of
22 representatives, one appointed by the minority leader
23 of the house of representatives, one appointed by the
24 majority leader of the senate, and one appointed by the
25 minority leader of the senate.
26 d. Each member of the board appointed by the
27 governor shall be a resident of this state and the
28 composition of voting members of the board shall be in
29 compliance with sections 69.16, 69.16A, and 69.16C.
30 e. The voting members of the board shall be
31 appointed for terms of six years beginning and ending
32 as provided in section 69.19. A member of the board is
33 eligible for reappointment. The governor shall fill
34 a vacancy for the remainder of the unexpired term. A
35 member of the board may be removed by the governor for
36 misfeasance, malfeasance, or willful neglect of duty or
37 other cause after notice and a public hearing unless
38 the notice and hearing are waived by the member in
39 writing.
40 f. The voting members of the board shall annually
41 elect one of the members as chairperson and one as vice
42 chairperson.
43 g. A majority of the voting members of the board
44 constitutes a quorum. The affirmative vote of a
45 majority of the voting members is necessary for any
46 action taken by the board. The majority shall not
47 include a member who has a conflict of interest and
48 a statement by a member of a conflict of interest is
49 conclusive for this purpose. A vacancy in the voting
50 membership of the board does not impair the right of a

1 quorum to exercise the rights and perform the duties
2 of the board. An action taken by the board under this
3 section may be authorized by resolution at a regular
4 or special meeting and each resolution may take effect
5 immediately and need not be published or posted.
6 Meetings of the board shall be held at the call of the
7 chairperson or at the request of a majority of the
8 voting members.

9 *h.* Members of the board may be reimbursed from the
10 moneys of the exchange for expenses incurred by them as
11 members, but shall not be otherwise compensated by the
12 exchange for their services.

13 *i.* The members of the board are subject to and are
14 officials within the meaning of chapter 68B.

15 *j.* The board shall consult with and provide
16 recommendations to assist the commissioner in carrying
17 out the powers and duties of the exchange set forth in
18 subsection 5.

19 *k.* The commissioner shall provide administrative
20 and technical support to the board in carrying out its
21 duties under this section.

22 4. *Plan of operation.*

23 *a.* The commissioner, in consultation with the
24 board, shall establish a plan of operation for the
25 exchange that assures the fair, reasonable, and
26 equitable administration of the exchange, within ninety
27 days after the appointment of the board. In addition
28 to other requirements, the plan of operation shall
29 provide for all of the following:

30 (1) The handling and accounting of assets and
31 moneys of the exchange.

32 (2) The amount and method of reimbursing expenses
33 of the members of the board.

34 (3) Regular times and places for meetings of the
35 board.

36 (4) Records to be kept of all financial
37 transactions, and an annual fiscal report of the costs
38 of administering the exchange to be delivered to the
39 general assembly by December 15 of each year.

40 (5) The periodic advertising of the general
41 availability of health coverage information and
42 assistance from the exchange.

43 (6) Additional provisions necessary or proper for
44 the execution of the powers and duties of the exchange.

45 *b.* The exchange has the general powers and
46 authority enumerated by this subsection and pursuant
47 to subsection 5 and executed in accordance with the
48 plan of operation established by the commissioner under
49 paragraph "a".

50 *c.* The exchange shall develop and implement the

1 plan of operation and corresponding timeline detailing
2 action steps toward implementing this section, by
3 rules adopted pursuant to chapter 17A as provided in
4 subsection 6.

5 5. *Powers and duties of exchange.*

6 a. The exchange shall develop a system that
7 provides a portal where uninsured Iowans can receive
8 assistance in how to obtain public or private health
9 care coverage. The department of human services shall
10 determine the eligibility of uninsured Iowans for
11 public programs and provide assistance with enrollment
12 in the appropriate public programs. The exchange shall
13 provide assistance with how to obtain private health
14 insurance coverage that meets certain standards of
15 quality and affordability to uninsured Iowans who are
16 not eligible for or do not wish to enroll in public
17 programs. The exchange, in consultation with the
18 board, shall develop a methodology to create a seamless
19 system that allows individuals to move between public
20 and private health care coverage, including increasing
21 opportunities for obtaining creditable coverage.

22 b. The exchange shall establish three categories
23 of benefits including basic or catastrophic benefits,
24 an intermediate level of benefits, and comprehensive
25 benefits coverage, that meet affordability limits
26 established pursuant to 2009 Iowa Acts ch. 118, section
27 1, subsection 4, paragraph "c".

28 c. (1) The exchange shall establish an information
29 clearinghouse to provide information to all Iowans
30 about all public and private health care coverage that
31 is available in the state including comparisons of
32 benefits, premiums, and out-of-pocket costs.

33 (2) The exchange may establish standards to provide
34 uniform and consistent information about the health
35 care coverage options offered by each carrier and
36 public program that includes but is not limited to
37 what benefits are covered and not covered, the amount
38 of coverage for each service, including copays and
39 deductibles, and any prior authorization requirements
40 for coverage.

41 (3) The exchange may require each carrier,
42 organized delivery system, and public program to
43 categorize and describe the category of benefits to
44 which each health care coverage option offered by a
45 carrier, organized delivery system, or public program
46 belongs as set forth in paragraph "b".

47 (4) The exchange shall provide ongoing information
48 to taxpayers about the costs of public health care
49 programs to the state, including the percentage and
50 source of state and federal funding for the programs.

1 (5) The exchange may provide counseling to assist
2 Iowans with making an informed choice when selecting
3 health care coverage.

4 d. The exchange shall encourage or develop the use
5 of common definitions for quality of care and pricing
6 of health care services and develop and implement
7 methodologies that provide quality and cost data on
8 health care services and health care coverage offered
9 in the state that is meaningful to consumers, patients,
10 and purchasers.

11 e. The commissioner may hire independent
12 consultants, as deemed necessary, to assist in carrying
13 out the powers and duties of the exchange.

14 f. The exchange shall collaborate with, including
15 but not limited to the board, the department of human
16 services, the department of public health, health care
17 providers, members of an organized consumer-purchaser
18 group, members of the Iowa collaborative safety net
19 provider network, and carriers to carry out the duties
20 of the exchange including dissemination of information
21 about the services offered by the exchange to the
22 public.

23 6. *Rules.* The commissioner shall adopt rules
24 pursuant to chapter 17A to implement the provisions of
25 this section.

26 7. *Iowa insurance information exchange fund created.*

27 a. An Iowa insurance information exchange fund is
28 created in the state treasury as a separate fund under
29 the control of the exchange. All moneys appropriated
30 or transferred to the fund shall be credited to the
31 fund. All moneys deposited or paid into the fund shall
32 only be appropriated to the exchange to be used for the
33 purposes set forth in this section.

34 b. Notwithstanding section 8.33, any balance in
35 the fund on June 30 of each fiscal year shall not
36 revert to the general fund of the state, but shall be
37 available for purposes of this section in subsequent
38 fiscal years. Notwithstanding section 12C.7, interest
39 earnings on moneys in the fund shall be credited to the
40 fund.

41 Sec. ____ . INITIAL MEMBERS OF ADVISORY BOARD OF
42 THE IOWA INSURANCE INFORMATION EXCHANGE. The initial
43 voting members of the advisory board of the Iowa
44 insurance information exchange shall be appointed
45 within thirty days after the effective date of this
46 division of this Act.>

47 2. By renumbering as necessary.

JACK HATCH

RICH OLIVE